



***We're celebrating ten years on a high note!***

We are pleased to announce the following dates for the 2009 season  
of the  
Cypress after 5 concert series.

**Friday, January 30, 2009 – Mama's Home Cookin'**  
Dance to a great variety band and enjoy a medley of Southern food,  
y'all.

**Friday, February 13, 2009 – Give My Regards to Broadway**  
Show tunes from Broadway performer Mary Gutzi coupled with New  
York style  
Italian foods.

**Friday, March 6, 2009 – The Charleston Symphony  
Orchestra**  
Our tenth anniversary gift to you. Our most popular group ever.

**Friday, April 17, 2009 – The Fantastic Shakers**  
Hits from one of the South's premiere beach bands mixed with  
traditional beach fare.



Clarendon Health Systems Presents:

CYPRESS AFTER 5

**Sponsorship Opportunities**

**GOLD Sponsors (up to 3) \$5,000 each**

- Entire concert series presented by (Company Name). Billing to read "company Name in association with Clarendon Health Systems presents Cypress after 5"
- Presenting sponsor featured prominently in all advertising. (Approximately 15 ads in the Manning Times, 200 posters, and 500 flyers.)
- Corporate logo on banner to be displayed in concert area.
- Corporate logo on the front cover of all four printed programs.
- Recognition from the podium at all four concerts.
- 15 concert tickets (January, February, March and April series) for distribution to board members, employees, etc.

**SILVER Sponsors (up to 8) \$2,500 each**

- Entire concert series supported by (Company or Individual Name).
- Supporting sponsor featured in all advertising. (Approximately 15 ads in the Manning Times, 200 posters, and 500 flyers.)
- Name on the front cover of all four printed programs.
- Recognition from the podium at all four concerts.
- 8 concert tickets (January, February, March and April series) for distribution to employees, family, friends, etc.

**BRONZE Sponsors \$1,500 each**

- Entire concert series supported by (Company or Individual Name).
- Supporting sponsor featured in all advertising.
- Name on the front cover of all four printed programs.
- Recognition from the podium at all four concerts.
- 6 concert tickets (January, February, March and April series) for distribution to employees, family, friends, etc.

**Concert Sponsors (up to 6 per concert) \$500 each**

- Individual concert sponsored by (Company Name). Billing to read "Tonight's Concert sponsored by Company name."
- Corporate logo or name on the front cover of printed program of sponsored concert.
- Recognition from the podium at sponsored concert.
- 2 concert tickets (January, February, March, and April series)

**Benefactors \$275 each**

- Name listed on back cover of all concert printed programs.
- 2 concert tickets January – April series



## 2009 Cypress after 5 Concert Series Order Form

### January-March Series Package

Number of Series Package requested \_\_\_\_\_ @ \$90.00 for each set (if purchased by December 1, 2008 = \_\_\_\_\_, payment enclosed. Series package includes all three concerts with receptions prior to performances. The package price increases to \$110.00 after this date.

### April Bonus Concert

Number of bonus concert tickets requested \_\_\_\_\_ @ \$25.00 & each (if purchased by December 1, 2008. Total amount enclosed \$ \_\_\_\_\_. The price increases to \$30.00 after this date.

### Another Way to Help Support the Arts in Clarendon County

\_\_\_\_\_ Yes, I would like to show my additional support for the Concert after 5 Concert Series by becoming a Benefactor sponsor of \$275.00. I will receive two complete packages, January – April and my name will be listed on concert program.

\_\_\_\_\_ I do not want to purchase tickets but would like to contribute to the concert series by donating \$ \_\_\_\_\_.

### Mail your order and contribution today!

Simply return this form with your payment to the Cypress Foundation, P.O. Box 550, Manning, SC 29102. Attention: Scherrie Cogdill

\_\_\_\_\_ Check enclosed \_\_\_\_\_ Charge to my credit card

\_\_\_\_\_ Type of card

\_\_\_\_\_ Name as it appears on card

\_\_\_\_\_ Card number \_\_\_\_\_ 3 Digit Pin #

\_\_\_\_\_ Expiration date

### **Tickets on sale at:**

The Zone – Cypress Center

The Cypress Foundation - Cypress Center

### Contact Information

Your Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_